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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY	Attorney Docket No.		SALTER P09AUSD3
	First Named Inventor or Appln Identified: James N. CURTI, James CHUA and Peter W. SALTER		
PATENT APPLICATION			
TRANSMITTAL	Title: NASAL CANNULA		
(Only for new nonprovisional applications under CFR 1.53(b))	Express Mail Label No.	EV330995145US	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent appln. contents.		Assistant Commissioner for Patents ADDRESS TO: Box Patent Application P. O. Box 1450 Alexandria, VA 22313-1450	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(submit an original, and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status <i>(see 37 CFR 1.27.)</i></p> <p>3. <input checked="" type="checkbox"/> Specification (Total Pages) [10] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> • Descriptive title of the invention • Cross References to Related Applications • Statement Regarding Fed sponsored R & D • Reference to Microfiche Appendix • Background of the Invention • Brief Summary of the Invention • Brief Description of the Drawings <i>(if filed)</i> • Detailed Description • Claim(s) • Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Pages) [1]</p> <p>4a. <input checked="" type="checkbox"/> Submission of Formal Drawings (Total Pages) [1]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration (Total Pages) [2]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from a prior application <i>(37 CFR 1.63(d))</i> <i>(for continuation/divisional with Box 17 completed)</i></p> <p>i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet (see 37 CFR).</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. <input type="checkbox"/> Nucleotide an/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper </p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>			
<p>ACCOMPANYING APPLICATION PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input checked="" type="checkbox"/> Other: Express Mail Certificate</p>			

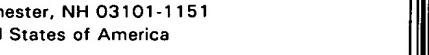
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-Part (CIP) of prior application No.: 09/837,720

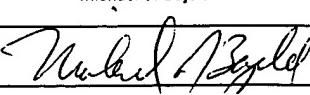
Prior application information: Examiner: Darwin P. Erezo Group/Art Unit: 3761

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<p>■ Customer Number: 020210</p> <p>Name: DAVIS & BUJOLD, P.L.L.C. 500 North Commercial Street - 4th floor Manchester, NH 03101-1151 United States of America</p>	<p>PATENT & TRADEMARK OFFICE</p> 	<p><input type="checkbox"/> Correspondence address below</p> <p>Telephone: 603/624-9220 Telefax: 603/624-9229 E-Mail: patent@davisandbujold.com</p>
<p>Name: Michael J. Bujold</p> <p>Signature: </p>	<p>020210</p>	<p>Registration No.: 32,018</p> <p>Date: July 25, 2003</p>

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003 <small>Patent fees are subject to annual revision</small> <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small>				<i>Complete if Known</i>					
				Application No. Filing Date First Named Inventor Examiner Name Group Art Unit		James N. CURTI Darwin P. Erezo 3761			
TOTAL AMOUNT OF PAYMENT: \$ 750				Attorney Docket No.		SALTER P09AUSD3			
METHOD OF PAYMENT (check all that apply)				FEES CALCULATION (continued)					
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 04-0213 Deposit Account Name: DAVIS & BUJOLD, P.L.L.C.				3. ADDITIONAL FEES					
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified account.				Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
				1051	130	2051	65	Surcharge-late filing fee/oath	
				1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
				1053	130	1053	130	Non-English specification	
				1812	2,520	1812	2,520	For filing a request for re-examination	
				1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
				1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
				1251	110	2251	55	Ext.for reply w/in 1 mon	
				1252	410	2252	205	Ext.for reply w/in 2 mon	
				1253	930	2253	465	Ext.for reply w/in 3 mon	
				1254	1,450	2254	725	Ext.for reply w/in 4 mon	
				1255	1,970	2255	985	Ext.for reply w/in 5 mon	
				1401	320	2401	160	Notice of Appeal	
				1402	320	2402	160	Filing a Brief in support of an appeal	
				1403	280	2403	140	Request for oral hearing	
FEES CALCULATION									
1. FILING FEE									
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description		Fee Paid			
1001	750	2001	375	Utility filing fee		750			
1002	330	2002	165	Design filing fee					
1003	520	2003	260	Plant filing fee					
1004	750	2004	375	Reissue filing fee					
1005	160	2005	80	Provision filing fee					
				SUBTOTAL (1)		\$750			
2. CLAIMS									
				<u>Extra</u>	<u>Fee From Below</u>	<u>Fee Paid</u>			
Total Claims	6-20*	= -0-	\$18 (\$9)	x	= -0-				
Ind. Claims	2- 3	= -0-	\$84 (\$42)	x	= -0-				
Mult.Ind.Claims		=	\$280 (\$140)	x	=				
** or number previously paid, if greater; For Reissues, see below									
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description					
1202	18	2202	9	Claims in excess of 20					
1201	84	2201	42	Independent claims in excess of 3					
1203	280	2203	140	Multiple dependent claim					
1204	84	2204	42	**Reissue independent claims over original patent					
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent					
				SUBTOTAL (2)		\$-0-			
**or number previously paid, if greater; For Reissues, see above				Other fee (specify) *Reduced by Basic Filing Fee Paid					
							SUBTOTAL (3) \$		
SUBMITTED BY .							Completed (if applicable)		
Type or Printed Name	Michael J. Bujold			Registration Number	32/018	Telephone No. (603) 624-9220			
Signature				Date: July 25, 2003	Deposit Account User ID	04-0213			

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : James N. CURTI, James CHUA and Peter W.
For : SALTER
Group Art Unit : NASAL CANNULA
Examiner : 3761
Docket : Darwin P. Erezo
: SALTER P09AUSD3

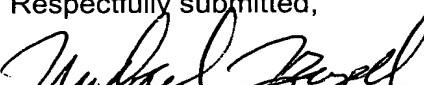
The Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF FORMAL DRAWINGS

Enclosed please find one (1) sheet of formal drawings which are to be entered in this case.

In the event that there are any fee deficiencies or additional fees are payable, please charge the same or credit any overpayment to our Deposit Account (Account No. 04-0213).

Respectfully submitted,


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Alexandria, VA 22313-1450

EXPRESS MAIL CERTIFICATE

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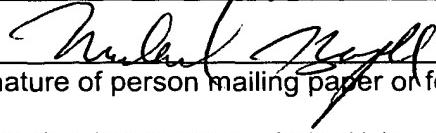
Date of Deposit: **7/25/03**

I hereby state that the following attached paper or fee:

**Check for \$750;
Patent Application Transmittal-1 pg.;
Fee Transmittal Ltr (+Dupl)-1 pg.;
Specification/Claims/Abstract- 10 pgs.;
Submission of Formal Drawings-1 pg.; Drawings - 1 pgs.;
Declaration & Power of Atty- 2 pgs.;
Information Disclosure Statement-1pg.;
PTO Form 1449-1 pg.;
Preliminary Amendment- 10 pgs.;
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are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10, on the date indicated above and is addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Michael J. Bujold



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